CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDEExplains how to complete this form. 1 ACCOUNT # (Ethics Commission filers) 10 3 CANDIDATE / OFFICEHOLDER NAME NICKNAME LAST SUFFIX Biggs 1 ACCOUNT # (Ethics Commission filers) 10 OFFICE USE ONLY Date Received Date Received OFFICE USE ONLY Biggs	Y
OFFICEHOLDER NAME Copyright Cop	Y
Biggs	IJ
4 CANDIDATE / OFFICEHOLDER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE CITY SECRETARY ADDRESS 3323 Richmond Avenue Suite C	<u>/</u>
Change of Address Change of Address Date Hand-delivered or Date Po	ostmarked
5 CAMPAIGN TITLE FIRST MI TREASURER Marvy A NAME Receipt # Amount	ı
NICKNAME LAST SUFFIX Date Processed Finger	······································
Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business) STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE 3323 Richmond Avenue Suite C Houston TX 77098	
7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (713) 526-3399	
8 REPORT TYPE January 15 X 30th day before election Runoff 15th day after campaign treass appointment (officeholder only	
July 15 Bth day before election Exceeded \$500 fmit Finel report (Attach C/OH - FR	₹)
9 PERIOD Month Day Year Month Day Year COVERED THROUGH 07/01/2001 09/27/2001	
10 ELECTION BLECTION DATE BLECTION TYPE Primary Runoff X General Special Special	ecial
11 OFFICE OFFICE HELD (ffamy) 12 OFFICE SOUGHT (if known) Other — Houston City Council	
13 DIRECT CAMPAIGN EXPENDITURE Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval of the direct campaign expenditure.	ral.
BY OTHER INDIVIDUALS	
Address/PO Box; Apt. / Suite #; City; State; Zip Code	
sdattornal pages	
GO TO PAGE 2	

CANDIDATE / SUPPORT &		OLDER REPORT:	FORM C/OH COVER SHEET PG 2
14 C/OH NAME George Biggs			15 ACCOUNT # (Ethics Commission filers) 10
16 NOTICE FROM POLITICAL COMMITTEE(S)	have been made with	es political expenditures by political committees to support the cand out the candidate's or officeholder's knowledge or consent. Candidaty receive notice of such expenditures COMMITTEE NAME	idate / officeholder. These expenditures may es and officeholders are required to report this
	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 NO REPORTABLE ACTIVITY	Check here if no	eportable activity occured during this reporting period. (Sign affidavid below and	submit pages 1 and 2 only.)
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 10.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS).	\$ 12755.00
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$ 21978.56
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$ 0.00
Sworn to an of Ditob	DAWN E.S Notary Public, Stat My Commission MARCH 26,	is true and correct and includes me under Title 18. Election Coc me under Title 18. Election Coc Signature of Coc Signature o	Candidate or Officeholder

	The Instruction	N GUIDE explains how to complete this form.		1 Total pages this	· ·	
2	FILER NAME George Bigg	s		3 ACCOUNT#	(Ethics Commission filers)	
4	Date	5 Full name of contributor uut-of-state PAC(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	07/10/2001	6 Contributor address; City; State; Zip Code Houston TX 77004		500.00		
9	Principal occup	ation (Optional)	10 Employer (Option	 al)		
	Date	Full name of contributor uut-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/17/2001	Contributor address; City; State; Zip Code Houston TX 77027		50.00		
	Principal occup	ation (Optional)	Employer (Option	al)		
	Date	Full name of contributor out-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/17/2001	Contributor address; City; State; Zip Code		100.00	 	
-	Principal occupation (Optional)		Employer (Optional)			
	Date	Full name of contributor out-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	08/29/2001	Contributor address; City; State; Zip Code West University Place TX 77005		100.00	 	
一	Principal occup	pation (Optional)	Employer (Optional)			
ļ	Date	Full name of contributor out-of-state PAC(ID# Patrick Michael Donovan)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/17/2001	Contributor address; City; State; Zip Code Houston TX 77027	•••••••	250.00	 	
-	Principal occup	pation (Optional)	Employer (Option	al)		
			<u> </u>			

The Instruction	ON GUIDE explains how to complete this form.		1 Total pages this	report:
 .			4/14	<u> </u>
FILER NAME George Bigg			3 ACCOUNT#	(Ethics Commission filers)
Date	Full name of contributor out-of-state PAC(ID# Martha V or Jose G Galvan)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/20/2001	6 Contributor address: City; State; Zip Code Houston TX 77018		50. 00	
Principal occup	pation (Optional)	10 Employer (Option	al)	
Date	Full name of contributor ut-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/01/2001	Contributor address; City; State; Zip Code Houston TX 77023		500.00	
Principal occup	pation (Optional)	Employer (Option	<u> </u>	
Date	Full name of contributor out-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/10/2001	Contributor address; City; State; Zip Code Houston TX 77252	••••••	50.00	
Principal occup	pation (Optional)	Employer (Option	l al)	
Date	Full name of contributor out-of-state PAC(ID# H A A Better Government Fund		Amount of contribution (\$)	In-kind contribution description (if applicable
09/24/2001	Contributor address; City; State; Zip Code Houston TX 77099	••••••	4000.00	
Principal occu	pation (Optional)	Employer (Option	lal)	<u> </u>
Date	Full name of contributor out-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable
09/13/2001	Contributor address; City; State; Zip Code Houston TX 77056-1903	•••••	25.00	
Principal occu	pation (Optional)	Employer (Option	al)	
•	<u> </u>			

FIL Ge OS	Date Date Date 0/17/2001 Date	5 Full name of contributor uut-of-state PAC(ID#	10 Employer (Option	3 ACCOUNT # 10 7 Amount of contribution (\$) 50.00 Amount of contribution (\$) 500.00	(Ethics Commission filers) 8
OS Pri	Date Date 0/17/2001 incipal occupate 9/10/2001	5 Full name of contributor out-of-state PAC(ID#	10 Employer (Option	Amount of contribution (\$) Amount of contribution (\$)	8 In-kind contribution description (if applicable
OS Pri	Date 9/10/2001	City; State; Zip Code Houston TX 77002 ation (Optional) Full name of contributor out-of-state PAC(ID#_ Houston Associated General Contractors PAC Contributor address; City; State; Zip Code Houston TX 77092	10 Employer (Option	7 Amount of contribution (\$) 50.00 al) Amount of contribution (\$)	description (if applicable
Pri OS	Date 9/10/2001 incipal occup	Houston TX 77002 ### Full name of contributor ### Contributor ### Out-of-state PAC(ID#	10 Employer (Option	Amount of contribution (\$)	
OS Pri	Date 9/10/2001 incipal occup	Full name of contributor ul-of-state PAC(ID# Houston Associated General Contractors PAC Contributor address; City; State; Zip Code Houston TX 77092)	Amount of contribution (\$)	
OS Pri	Date 9/10/2001 incipal occup	Full name of contributor out-of-state PAC(ID#)	Amount of contribution (\$)	
OS Pri	9/10/2001 incipal occup	Houston Associated General Contractors PAC Contributor address; City; State; Zip Code Houston TX 77092		contribution (\$)	
Pri	incipal occup	Contributor address; City; State; Zip Code Houston TX 77092		500.00	j
	· · · · ·	· · · · · · · · · · · · · · · · · · ·	Employer (Option		i
	· · · · ·	ation (Optional)	Employer (Option		İ
09	Date			al)	
09		Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable
	9/17/2001	Contributor address; City; State; Zip Code Houston TX 77027	•••••	1000.00	
Principal occupation (Optional)			Employer (Option	l nai)	
Date Full name of contributor out-of-state PAC(tD#			<u> </u>	Amount of	In-kind contribution
		Mohammed Dilshad Kasmani		contribution (\$)	description (if applicable
0	9/25/2001	Contributor address; City; State; Zip Code Houston TX 77002		50.00	! ! !
Principal occupation (Optional)			Employer (Option	nal)	-!
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable
0:	9/17/2001	Contributor address; City; State; Zip Code		250.00	
Principal occupation (Optional)			Employer (Onting	<u></u>	
-1	melpar occup	pation (Optional)	Employer (Option	lai)	

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2	FILER NAME George Bigg			3 ACCOUNT#	(Ethica Commission filars)
4	Date	5 Full name of contributor ul-of-state PAC(ID#	,	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/24/2001	24/2001 6 Contributor address; City; State; Zip Code		500.00	
9	Principal occup	pation (Optional)	10 Employer (Option	al)	
	Date	Full name of contributor out-of-state PAC{ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/29/2001	Contributor address; City; State; Zip Code Houston TX 77027		50.00	
	Principal occup	pation (Optional)	Employer (Option	al)	! · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/17/2001	Contributor address; City; State; Zip Code Houston TX 77008		30.00	
	Principal occupation (Optional)		Employer (Optional)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/20/2001	Contributor address; City; State; Zip Code Houston TX 77007		500.00	
Principal occupation (Optional)			Employer (Optional)		
	Date	Full name of contributor out-of-state PAC(ID# Joe Richard Martin		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2001	Contributor address; City; State; Zip Code Houston TX 77002		10.00	
	Principal occu	pation (Optional)	Employer (Option	nal)	<u> </u>

	The Instruction	ON GUIDE explains how to complete this form.		1 Total pages this 7/14	•	
2	FILER NAME George Bigg			3 ACCOUNT#	(Ethica Commission Ners)	
4	Date	5 Full name of contributor uut-of-state PAC(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	07/10/2001	6 Contributor address; City; State; Zip Code San Antonio TX 78209	• • • • • • • • • • • • • • • • • • • •	250.00	† -	
9	Principal occup	ation (Optional)	10 Employer (Option	al)	 	
	Date	Full name of contributor out-of-state PAC(ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	07/10/2001	Contributor address; City; State; Zip Code Chicago IL 60610		100.00	 	
	Principal occup	pation (Optional)	Employer (Option	al)		
	Date	Full name of contributor uut-of-state PAC(ID#Outdoor PAC)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/17/2001	Contributor address; City; State; Zip Code Houston TX: 77055	•••••••••••••••••••••••••••••••••••••••	500.00		
	Principal occup	pation (Optional)	Employer (Optional)			
-	Date	Full name of contributor out-of-state PAC(ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/17/2001	Contributor address; City; State; Zip Code Houston TX 77019		50.00	 	
Principal occupation (Optional)			Employer (Optional)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/17/2001	Contributor address; City; State; Zip Code Houston TX 77019	•••••••	100.00	· 	
	Principal occup	pation (Optional)	Employer (Optional)			
	<u></u> .					

Jason Presley O9/17/2001	ne Instruction	Guide explains how to complete this form.		Total pages this in 8/14	•
Jason Presley 09/17/2001					(Ethics Commission filens)
Principal occupation (Optional) Date Full name of contributor out-of-state PAC(ID# Optional) Op/17/2001 Contributor address; City; State; Zip Code 100.00 In-kind contributor Op/17/2001 Contributor address; City; State; Zip Code 100.00 In-kind contributor Op/17/2001 Contributor address; City; State; Zip Code In-kind contributor Op/17/2001 Op/17/2001 Contributor Op/17/2001 Contributor Op/17/2001 Contributor Op/17/2001 Op/17/2001 Contributor Op/17/2001 Contributor Op/17/2001 Contributor Op/17/2001		Jason Presley			8 In-kind contribution description (if applicable
Date Full name of contributor out-of-state PAC(ID# 100.00 In-kind contribution (\$)	•	6 Contributor address; City; State; Zip Code		30.00]
William Patrick Redmond O9/17/2001 Contributor address; City; State; Zip Code Principal occupation (Optional) Date Full name of contributor out-of-state PAC(ID#	incipal occupa	tion (Optional)	10 Employer (Optiona	il)	
Houston TX 77006 Houston TX 77006 Employer (Optional) Employer (Optional)		William Patrick Redmond	,		In-kind contribution description (if applicabl
Date Full name of contributor out-of-state PAC(ID#) Amount of contribution (\$) In-kind contribution (\$)	9/17/2001	Contributor address; City; State; Zip Code	:	100.00	
Republic of Texas Old Capitol Club, L.P. O9/17/2001	rincipal occupa	ation (Optional)	Employer (Options	al)	· -
Principal occupation (Optional) Date Full name of contributor out-of-state PAC(ID#	Date)		In-kind contribution description (if applicable)
Date Full name of contributor out-of-state PAC(ID#) Amount of contribution (\$) O9/17/2001 Contributor address: City; State; Zip Code 50.00 Houston TX 77007 Principal occupation (Optional) Employer (Optional) Date Full name of contributor out-of-state PAC(ID#) Amount of contribution (\$) O9/10/2001 Contributor address; City; State; Zip Code 1000.00	9/17/2001			250.00	
Shannon Richards O9/17/2001 Contributor address: City; State; Zip Code Frincipal occupation (Optional) Date Full name of contributor out-of-state PAC(ID#			Employer (Optional)		1
Principal occupation (Optional) Employer (Optional) Date Full name of contributor Tom or Carolyn Rumney Description (if a description of a description of a description (if a description of	Date	-)		In-kind contribution description (if applicab
Principal occupation (Optional) Date Full name of contributor out-of-state PAC(ID#) Tom or Carolyn Rumney Contributor address; City; State; Zip Code Employer (Optional) Amount of contribution (\$) In-kind contribution (if a description (if a description (if a description)))9/17/2001	Contributor address: City; State; Zip Code		50. 00	
Date Full name of contributor out-of-state PAC(ID#) Amount of contribution (\$) In-kind contribution (\$) description (if a 09/10/2001 Contributor address; City; State; Zip Code 1000.00	Principal accura	· · · · · · · · · · · · · · · · · · ·	Employer (Option	al\	<u>i</u>
Tom or Carolyn Rumney Contribution (\$) Contribution (\$) Contribution (\$) Contribution (\$) Contribution (\$)			Employer (opport		
	Date	<u></u>)		In-kind contribution description (if applicab
Houston 1X 77040-2476)9/10/2001	Contributor address; City; State; Zip Code Houston TX 77040-2476		1000.00	
Principal occupation (Optional) Employer (Optional)	'rincipal occup	ation (Optional)	Employer (Option	al)	

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2	FILER NAME George Bigg			3 ACCOUNT#	(Ethics Commission Rem)		
4	Date	5 Full name of contributor out-of-state PAC(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/17/2001	6 Contributor address; City; State; Zip Code		100.00			
		Houston TX 77007		!] 		
9	Principal occup	ation (Optional)	10 Employer (Option	ai)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/13/2001	Contributor address; City; State; Zip Code O Houston TX 77057		1000.00	 		
	Principal occup	ation (Optional)	Employer (Option	al)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/17/2001	Contributor address; City; State; Zip Code Houston TX 77098	••••••	100.00	 		
	Principal occupation (Optional)		Employer (Optional)				
:	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/10/2001	Contributor address; City; State; Zip Code Houston TX 77046	••••••	100.00	 		
	Principal occup	pation (Optional)	Employer (Optional)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/01/2001	Contributor address; City; State; Zip Code Austin TX 78759		200.00	 		
T	Principal occupation (Optional)		Employer (Optional)				
			-				

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FILER NAM George Bi					3 ACCOUNT#	(Ethics Commission filers)
Date	5 Full na W.P. Ziv		out-of-state PAC(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable
08/29/2001			City; State; Zip Cod	e	250.00	
Principal occ				10 Employer (Optio	nai)	
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FILER NAME George Bigg	· · · · · · · · · · · · · · · · · · ·		11/14 3 ACCOUN 10	丁 # (Ethics Commission filers)
Date	5 Payee name	<u> </u>	<u> </u>	7 Amount
07/27/2001	Blakemore & Associates			(\$) 4008.42
5 •				4000.42
information re-	penditure (See instructions regarding type of quired.) 4000 Courier-\$8.42	9 Complete if direct exp Candidate / Officeholder in		efit C/OH "" Office sought Office held
Date	Payee name			Amount
07/31/2001	Blakemore & Associates			(\$) 4500.00
	Payee address; City; State; Zip Code			
	3323 Richmond Ave Suite C Houston TX 77098			
Due			· 	
Purpose of ex information re Consulting F	The state of the s	Complete if direct exp Candidate / Officeholder		efit C/OH •• Office sought Office held
information re	quired.)			Office sought Office held Amount
information re Consulting F	quired.) Fees			Office sought Office held
Information re Consulting F	quired.) ees Payee name	Candidate / Officeholder		Office sought Office held Amount (\$)
information re Consulting F	ees Payee name Blakemore & Associates	Candidate / Officeholder		Office sought Office held Amount (\$)
Date O8/15/2001 Purpose of exinformation re	payee name Blakemore & Associates Payee address; City; State; Zip Code 3323 Richmond Ave Suite C Houston TX 77098	Candidate / Officeholder	name	Amount (\$) 144.30
Date O8/15/2001 Purpose of exinformation re	Payee name Blakemore & Associates Payee address; City; State; Zip Code 3323 Richmond Ave Suite C Houston TX 77098 spenditure (See instructions regarding type of equired.)	Candidate / Officeholder	name	Amount (\$) 144.30 efit C/OH ** Office sought Office held
Date O8/15/2001 Purpose of en information re Courier-\$19	Payee name Blakemore & Associates Payee address; City; State; Zip Code 3323 Richmond Ave Suite C Houston TX 77098 spenditure (See instructions regarding type of equired.) 30 Design-\$125.00	Candidate / Officeholder	name	Amount (\$) 144.30 Amount Office held
Date O8/15/2001 Purpose of exinformation re Courier-\$19	Payee name Blakemore & Associates Payee address; City; State; Zip Code 3323 Richmond Ave Suite C Houston TX 77098 Rependiture (See instructions regarding type of equired.) 30 Design-\$125.00 Payee name Blakemore & Associates	Candidate / Officeholder e Complete if direct ex Candidate / Officeholder	name	Amount (\$) 144.30 efit C/OH ** Office sought Office held
Date O8/15/2001 Purpose of exinformation re Courier-\$19	Payee name Blakemore & Associates Payee address; City; State; Zip Code 3323 Richmond Ave Suite C Houston TX 77098 Rependiture (See instructions regarding type of equired.) 30 Design-\$125.00	Candidate / Officeholder e Complete if direct ex Candidate / Officeholder	name	Amount (\$) 144.30 Amount Office held

exas Ethics Con	nmission P.O.Box 12070 Austin, Texas 78	3711-2070	(512)463-5800	1-800-325-8506
POLITI	CAL EXPENDITURES		S	SCHEDULE F
The Instructi	ION GUIDE explains how to complete this form.		1 Total pages report: 12/14	, "
2 FILER NAM George Big			3 ACCOUNT# ®	Ethics Commission filers)
4 Date 09/12/2001	5 Payee name Blakemore & Associates 6 Payee address; City; State; Zip Code 3323 Richmond Ave Suite C		7	Amount (\$) 1018.44
information re	Houston TX 77098 Appenditure (See instructions regarding type of equired.) O Design-\$125 Courier-\$30.28 Print-\$546 -	9 Complete if direct exp Candidate / Officeholder r	enditure to benefit C/O name Office so	
Date 09/05/2001	Payee name CMGV Worldwide Payee address; City; State; Zip Code 3730 Kirby Dr Suite 418 Houston TX 77098-3007			Amount (\$) 2500.00
Purpose of exinformation re Consulting		Complete if direct exp Candidate / Officeholder	penditure to benefit C/C name Office so	
Date 09/27/2001	Payee name CMGV Worldwide Payee address; City; State; Zip Code 3730 Kirby Dr Suite 418 Houston TX 77098-3007	• • • • • • • • • • • • • • • • • • • •		Amount (\$) 2500.00
Purpose of e information r Consulting		Complete if direct exp Candidate / Officeholder	Denditure to benefit C/C name Office so	OH ** Office held
Date 09/27/2001	Payee name Capitol Beverage Service Payee address; City; State; Zip Code 401 Louisiana Suite 206 Houston TX 77002			Amount (\$) 480.00
Information r	expenditure (See instructions regarding type of required.) Orink for Fundraiser	Complete if direct ex Candidate / Officeholder	penditure to benefit C/0 name Office s	

1-800-325-8506

The Instruction	N GUIDE explains how to complete this form.		1 Total pages report: 13/14	
FILER NAME George Bigg		3	ACCOUNT # (Ethics Commission fliers) 10	
Date	5 Payee name		7 Amount	
09/27/2001	Joe Richard Martin		(\$) 150.00	
†	6 Payee address; City; State; Zip Cod			
	909 Texas Ave Suite 203 Houston TX 77002			
	penditure (See instructions regarding type of	9 Complete if direct expendi		
information red Room Rental	uired.) for Fundraiser	Candidate / Officeholder name	Office sought Office held	
Date	Payee name	<u> </u>	Amount	
09/27/2001	E.D. Nevie		(\$)	
09/2//2001		100.00		
	Payee address; City; State; Zip Coo	E		
	909 Texas Ave#1305			
	Houston TX 77002	1		
Purpose of ex	penditure (See instructions regarding type of	Complete if direct expend Candidate / Officeholder name		
Purpose of ex information re Security for I	penditure (See instructions regarding type of quired.)			
information re	penditure (See instructions regarding type of quired.)			
information re	penditure (See instructions regarding type of quired.)		e Office sought Office held Amount	
information re Security for I	penditure (See instructions regarding type of quired.) Fundraiser	Candidate / Officeholder name	Amount (\$) 1688,70	
information re Security for I	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart	Candidate / Officeholder name	Amount (\$) 1688,70	
information re Security for I	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart	Candidate / Officeholder name	Amount (\$) 1688,70	
information re Security for I	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod	Candidate / Officeholder name	Amount (\$) 1688,70	
Date 08/14/2001	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061	Candidate / Officeholder name	Amount (\$) 1688.70	
Date O8/14/2001 Purpose of exinformation resistance of e	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061	Candidate / Officeholder name	Amount (\$) 1688.70	
Date 08/14/2001	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061	Candidate / Officeholder name	Amount (\$) 1688.70	
Date O8/14/2001 Purpose of exinformation re	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061 spenditure (See instructions regarding type of quired.)	Candidate / Officeholder name	Amount (\$) 1688.70	
Date Date O8/14/2001 Purpose of exinformation re Yard Signs	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061 spenditure (See instructions regarding type of quired.)	Candidate / Officeholder name	Amount (\$) 1688.70 Liture to benefit C/OH Office sought Office held Amount (\$)	
Date O8/14/2001 Purpose of exinformation re	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061 penditure (See instructions regarding type of quired.) Payee name SignMart	Candidate / Officeholder name	Amount (\$) 1688.70	
Date O8/14/2001 Purpose of exinformation re Yard Signs	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061 Expenditure (See instructions regarding type of equired.) Payee name SignMart Payee address; City; State; Zip Cod SignMart Payee address; City; State; Zip Cod SignMart	Candidate / Officeholder name	Amount (\$) 1688.70 Liture to benefit C/OH Office sought Office held Amount (\$)	
Date Date O8/14/2001 Purpose of exinformation re Yard Signs	penditure (See instructions regarding type of quired.) Fundraiser Payee name SignMart Payee address; City; State; Zip Cod 8222 Lockheed Houston TX 77061 penditure (See instructions regarding type of quired.) Payee name SignMart	Candidate / Officeholder name	Amount (\$) 1688.70 Liture to benefit C/OH Office sought Office held Amount (\$)	
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as Ethics Com	mission P.O.Box 12070 Austin, Texas	78711-2070	(512)463-5 <u>8</u> 00	1-800-325-850	
POLITI	CAL EXPENDITURES		sc	HEDULE F	
The Instructi	ON GUIDE explains how to complete this form.		1 Total pages report:		
2 FILER NAME			3 ACCOUNT # (Ethlics Commission filers)		
George Big		10			
Date 08/09/2001	 5 Payee name Vision America 6 Payee address; City; State; Zip Cox P.O. Box 1000 	de	7	Amount (\$) 200.00	
•	Pearland TX 77588				
Purpose of expenditure (See instructions regarding type of information required.) Dinner Sponsorship		9 Complete if direct e Candidate / Officeholds	xpenditure to benefit C/OH er name Office sougt	ot Office held	
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